PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

16 608 527

CLAIMIS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			19		10, 2700		ſ	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA		BASIC PER		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			(9 minus 20=		* V		Ī	X\$ 9=	1	OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 = 1		* 0			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							ſ	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2		TOTAL	3+5	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
-		(Column 1) CLAIMS	, <u>, , , , , , , , , , , , , , , , , , </u>	(Colun		(Column 3)	_	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	•	NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≃	
	Independent	* NTATION OF M	Minus	***	CLAIM	=		X42=		OR	X84=	
<u></u>	THIOTTE	STATION OF IM		LINDLINI	Qurilly			+140=		OR	+280=	
 -							<u>.</u>	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, PEE	
	(Column 1) (Column 2) (Column 3)										, , , , , , , , , , , , , , , , , , ,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CLAIM	=		X42=		OR	X84=	
-	I MOT THEOL	ANATION OF IM	JUIN GE DEI	CNOCIVI	CLANVI			+140=		OR	+280=	
							L	TOTAL ADDIT: FEE		OR	TOTAL ADDIT. FEE	
l		(Column 1)		(Colun	nn 2)	(Column 3)				-	, 1001,11, 122,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		#		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er four	nd in the app	xopriate box	x in co	lumn 1.	